

PRESCOTT STRANDING GRANT APPLICATION PACKAGE

TO: THOSE INTERESTED IN THE PRESCOTT STRANDING GRANT PROGRAM

Attached is an application package for the Prescott Stranding Grant Program. The Federal Register solicitation notice (draft attached, without comments and responses) identifies the eligibility requirements, priority areas for funding, and contains application instructions and guidelines. Also attached is the complete list and copies of the forms to be completed and returned with the application. Applications (one signed original and two copies) must be received by any of the National Marine Fisheries Service Offices listed in the solicitation notice by close of business date that will be published in the final Federal Register Notice, likely in mid **April 8, 2002. PLEASE CHECK OUR WEBSITE REGULARLY TO GET THE FINAL SOLICITATION NOTICE AND DEADLINE.** The attached draft is intended to help you begin preparation of your application, however, you are responsible for making sure that your application is responsive to the FINAL solicitation notice.

Applications received after the 5:00 pm local time on the deadline date published in the Federal Register will **not** be considered, and will be returned. Facsimile and electronic mail applications will **not** be accepted.

Additional information may be obtained from:

http://www.nmfs.noaa.gov/prot_res/PR2/Health_and_Stranding_Response_Program/Prescott.html

OR:

Dr. Teri Rowles
Office of Protected Resource F/PR2
National Marine Fisheries Service, NOAA
1315 East West Highway
Silver Spring, Maryland 20910

Telephone: (301) 713-2322

Email: PrescottGrantFR.comments@noaa.gov

Attachments

Prescott Stranding Grants Application Package

* items are those that are only required if pertinent to particular applicants.

A. Items Required by FR Notice for Consideration as a Complete Application

(original and two signed copies of the application package, all unbound, are required)

1. SIGNED SF-424, "Application for Federal Assistance". Form with instructions and supplemental instructions *enclosed*.
2. SF-424A, "Budget Information - non construction programs". Provide necessary supporting detail on separate sheet if necessary. Form with instructions, supplemental instructions, and guidelines regarding budget justification *enclosed*.
3. SIGNED SF - 424B, "Assurances - non-construction programs". Form *enclosed*.
4. Title page: project title, duration, name, affiliation, address and phone number of the Principal Investigator (the applicant), project objective, specific priority to which the application responds, statement regarding the Federal, non-Federal, and total costs of the project.
5. Narrative Project Description: Up to 10 pages, including descriptions of:
 - Project goals and objectives, including specific priority addressed
 - Project impacts
 - Evaluation of project
 - Need for government financial assistance
 - Existing Federal, state, and local government activities and permits
 - Project statement of work
 - Participation by persons or groups other than the applicant
 - Project management (include curriculum vitae)
6. Supporting documentation

*Additionally, submit the Acknowledgment Form (*enclosed*) for Prescott Program if you want notice that we have received your package.

B. Items Required from Applicant Prior to Receipt of Award:

(NOTE: these can be submitted with initial application)

1. SIGNED CD-511, "Certifications regarding debarment, suspension and other responsibility matters; drug-free workplace requirements and lobbying." Form *enclosed*.
2. *SIGNED SF-LLL, "Disclosure of Lobbying Activities" (Blocks 1-11 must be filled in if applicable). Form *enclosed*.
3. * Copy of current approved negotiated indirect cost rate agreement. (Indirect cost rate can be charged only if the applicant has an approved negotiated indirect cost rate agreement awarded by a cognizant agency).
4. *Proof of Status for first time eligible non-profit and commercial applicants. See *enclosed* list of types of proof needed.

APPLICATION FOR FEDERAL ASSISTANCE

OMB Approval No. 0348-0043

FEDERAL ASSISTANCE			2. DATE SUBMITTED		Applicant Identifier																						
1. TYPE OF SUBMISSION: Application <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		Preapplication <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		3. DATE RECEIVED BY STATE		State Application Identifier																					
				4. DATE RECEIVED BY FEDERAL AGENCY		Federal Identifier																					
5. APPLICANT INFORMATION																											
Legal Name:				Organizational Unit:																							
Address (give city, county, State, and zip code):				Name and telephone number of person to be contacted on matters involving this application (give area code)																							
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <div><div><div></div><div></div></div> — <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div></div>				7. TYPE OF APPLICANT: (enter appropriate letter in box) <div><div><div></div></div></div>																							
8. TYPE OF APPLICATION: <div><div><input type="checkbox"/> New</div><div><input type="checkbox"/> Continuation</div><div><input type="checkbox"/> Revision</div></div> If Revision, enter appropriate letter(s) in box(es) <div><div><div></div></div><div><div></div></div></div> A. Increase Award B. Decrease Award C. Increase Duration D. Decrease Duration Other(specify): <div></div>				A. State B. County C. Municipal D. Township E. Interstate F. Intermunicipal G. Special District																							
				H. Independent School Dist. I. State Controlled Institution of Higher Learning J. Private University K. Indian Tribe L. Individual M. Profit Organization N. Other (Specify) _____																							
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <div><div><div></div><div></div></div> — <div><div></div><div></div><div></div></div></div> TITLE:				9. NAME OF FEDERAL AGENCY:																							
12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.):				11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:																							
13. PROPOSED PROJECT		14. CONGRESSIONAL DISTRICTS OF:																									
Start Date	Ending Date	a. Applicant		b. Project																							
15. ESTIMATED FUNDING: <table><tr><td>a. Federal</td><td>\$</td><td>.00</td></tr><tr><td>b. Applicant</td><td>\$</td><td>.00</td></tr><tr><td>c. State</td><td>\$</td><td>.00</td></tr><tr><td>d. Local</td><td>\$</td><td>.00</td></tr><tr><td>e. Other</td><td>\$</td><td>.00</td></tr><tr><td>f. Program Income</td><td>\$</td><td>.00</td></tr><tr><td>g. TOTAL</td><td>\$</td><td>.00</td></tr></table>				a. Federal	\$.00	b. Applicant	\$.00	c. State	\$.00	d. Local	\$.00	e. Other	\$.00	f. Program Income	\$.00	g. TOTAL	\$.00	16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS? a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE _____ b. No. PROGRAM IS NOT COVERED BY E. O. 12372 OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW		
				a. Federal	\$.00																					
				b. Applicant	\$.00																					
				c. State	\$.00																					
				d. Local	\$.00																					
				e. Other	\$.00																					
				f. Program Income	\$.00																					
g. TOTAL	\$.00																									
17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? <div><input type="checkbox"/> Yes If "Yes," attach an explanation. <input type="checkbox"/> No</div>																											
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.																											
a. Type Name of Authorized Representative			b. Title		c. Telephone Number																						
d. Signature of Authorized Representative				e. Date Signed																							

INSTRUCTIONS FOR THE SF-424

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This is a standard form used by applicants as a required facesheet for preapplications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

- | Item: | Entry: |
|---|--|
| 1. Self-explanatory. | 12. List only the largest political entities affected (e.g., State, counties, cities). |
| 2. Date application submitted to Federal agency (or State if applicable) and applicant's control number (if applicable). | 13. Self-explanatory. |
| 3. State use only (if applicable). | 14. List the applicant's Congressional District and any District(s) affected by the program or project. |
| 4. If this application is to continue or revise an existing award, enter present Federal identifier number. If for a new project, leave blank. | 15. Amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines as applicable. If the action will result in a dollar change to an existing award, indicate <u>only</u> the amount of the change. For decreases, enclose the amounts in parentheses. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15. |
| 5. Legal name of applicant, name of primary organizational unit which will undertake the assistance activity, complete address of the applicant, and name and telephone number of the person to contact on matters related to this application. | 16. Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process. |
| 6. Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service. | 17. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes. |
| 7. Enter the appropriate letter in the space provided. | 18. To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.) |
| 8. Check appropriate box and enter appropriate letter(s) in the space(s) provided: | |
| -- "New" means a new assistance award. | |
| -- "Continuation" means an extension for an additional funding/budget period for a project with a projected completion date. | |
| -- "Revision" means any change in the Federal Government's financial obligation or contingent liability from an existing obligation. | |
| 9. Name of Federal agency from which assistance is being requested with this application. | |
| 10. Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested. | |
| 11. Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project location. For preapplications, use a separate sheet to provide a summary description of this project. | |

**Supplemental Instructions for Use when Completing a SF-424 Financial Assistance
Application for submission to NOAA for the Prescott Stranding Grant Program
Prepared by NOAA GMD, adapted by NMFS F/PR2**

SF424, APPLICATION FOR FEDERAL ASSISTANCE

(Revised Form dated 7-97.)

Block 1. TYPE OF SUBMISSION:

Check the Non-Construction block in the "**Application**" section. This is the formal document submitted by the applicant upon which an award will be made. This program does not accept preapplications.

Block 2. DATE SUBMITTED:

The date submitted to the Federal agency is very important and if not completed will delay processing of the application.

Block 3. DATE RECEIVED BY STATE:

For state applicants in states that require submission to a State Single Point of Contact (SPOC), indicate here the date that the application was received by the state. You can get a list of the SPOCs from the Catalog of Federal Domestic Assistance, or from the Prescott Grant Program homepage, at:
http://www.nmfs.noaa.gov/prot_res/PR2/Health_and_Stranding_Response_Program/Prescott.html

Contact your state's SPOC to determine whether or not your state requires review and clearance of the Prescott Stranding Grant application. If SPOC clearance is required, you are responsible for getting that clearance in time to submit your application to the Prescott Stranding Grant Program by the published deadline.

State Application Identifier (SAI): (If applicable, i.e. if you check yes in Block 16.)

Block 4. DATE RECEIVED BY FEDERAL AGENCY:

Date will be entered by Federal Agency upon receipt.

FEDERAL IDENTIFIER: For 2001/2002, all applications to the Prescott Stranding Grant Program are "New" (see Block 8) and therefore this block does not have to be completed.

Block 5. APPLICANT INFORMATION: The applicant should be the Principal Investigator - the lead organization and person listed as the technical contact, responsible for all technical oversight and implementation of the approved work plan that will be delineated in the Statement of Work. One Principal Investigator must be listed on each project.

Block 6. EMPLOYER IDENTIFICATION NUMBER:

Number assigned by Internal Revenue Service as your or your organization's tax Identification number.

Obtain from your employer/business office. **Must be included.**

Block 7. TYPE OF APPLICANT:

NOTE: For purposes of this application, State universities are considered Institutions of Higher Learning (I) - not state. Covered under OMB Circular A-110.

Block 8. TYPE OF APPLICATION:

For the 2001/2002 Prescott Stranding Grant Program, all applications will be "New".

Block 9. NAME OF FEDERAL AGENCY:

Insert: NOAA

Block 10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER (CFDA):

a. Number: The Prescott Stranding Grant Program number is **11.439**.

b. Title: The CFDA Title for the Prescott Stranding Grant Program is "Marine Mammal Data Program"

NOTE: CFDA-Catalog of Federal Domestic Assistance. All universities and states have them. Can be obtained from [Http://aspe.os.dhhs.gov/cfda/intro.htm](http://aspe.os.dhhs.gov/cfda/intro.htm) or from the Superintendent of Documents, Government Printing Office, Washington, DC 20402 and public libraries.

Block 11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:

Use key words. Provide concise description. Follow instructions on the SF-424.

Block 12. AREAS AFFECTED BY PROJECT: Self Explanatory

Block 13. PROPOSED PROJECT START DATE:

Indicate the total period of performance for the project. Start date should be no earlier than three months before the anticipated date of obligation of the funds. Although we expect selection of successful applicants in June, it takes approximately 2 months for actual obligation of funds. For the Prescott Stranding Grant Program, we recommend a start date no earlier than May 15, 2002.

Block 14. CONGRESSIONAL DISTRICTS OF:

a. Self Explanatory b. Should relate to No. 12.

Block 15. ESTIMATED FUNDING:

"a." Funds requested for this budget period of the project (usually 12 months).

"b." should include all funding for this budget period by the applicant, regardless of type.

"c." would be used for in-kind contributions (third party non-monetary donations or loans used for the project), cost sharing, or match from state, unless applicant is a state, in which case "b" would be used.

"d." would be used for in-kind contributions, cost sharing, or match from local government, unless applicant is a local government, in which case "b" would be used.

"e." would be used for in-kind contributions, cost sharing, or match from "other sources" not identified in "a through d".

"f." would be used to show estimated income to be derived from this project, e.g., registration fees, sale of fish, admission fees. Program Income to be used as designated in the NOAA Administrative Special Award Condition.

NOTE: Funds shown in (b.-e.) will be included in the award as contributions/cost sharing/match and cannot be withdrawn or adjusted after awarded.

Block 16. IS APPLICANT SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS? For State applicants only.

Either "a. YES" or "b. NO" must be checked by all State applicants. Contact your state's single point of contact (SPOC) to determine whether or not your state requires review and clearance of the Prescott Stranding Grant application. If SPOC clearance is required, you are responsible for getting that clearance in time to submit your application to the Prescott Stranding Grant Program by the published deadline.

You can get a list of the SPOCs from the Catalog of Federal Domestic Assistance, or from the Prescott Grant Program homepage, at:

http://www.nmfs.noaa.gov/prot_res/PR2/Health_and_Stranding_Response_Program/Prescott.html

If YES, and the date and the SAI are not provided in Block No. 3 above, they must be furnished immediately upon receipt from the SPOC to the Federal Program Officer (the NOAA grant administrator that will be contacting you if your application is selected).

Block 17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?

Either a. or b. must be completed.

We will not award any Federal funds to you or any subrecipients who have an outstanding delinquent Federal debt or fine until either:

- a. The delinquent account is paid in full,
- b. A negotiated repayment schedule is established and at least one payment is received, or
- c. Other arrangements satisfactory to Commerce are made.

NOTE: If "No" is checked but a review by the NOAA Grants Management Division reveals that the applicant organization (for universities, any campus, for States, any bureau or agency) is delinquent on any payment, i.e., taxes, invoices, etc., the award will not be made until the delinquency has been resolved.

Block 18. SIGNATURES:

Must be signed by legal applicant. (Authorizing signature of Organization performing work or responsible for performance of work.) Blocks 18 a.-e. must be completed. If approved, the award will be addressed to this person.

BUDGET INFORMATION - Non-Construction Programs

OMB Approval No. 0348-0044

SECTION A - BUDGET SUMMARY						
Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1.		\$	\$	\$	\$	\$
2.						
3.						
4.						
5. Totals		\$	\$	\$	\$	\$

SECTION B - BUDGET CATEGORIES					
6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)		
a. Personnel	\$	\$	\$	\$	\$
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges (sum of 6a-6h)					
j. Indirect Charges					
k. TOTALS (sum of 6i and 6j)	\$	\$	\$	\$	\$

7. Program Income	\$	\$	\$	\$	\$
-------------------	----	----	----	----	----

Authorized for Local Reproduction

SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8.	\$	\$	\$	\$
9.				
10.				
11.				
12. TOTAL <i>(sum of lines 8-11)</i>	\$	\$	\$	\$

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$	\$	\$	\$	\$
14. Non-Federal					
15. TOTAL <i>(sum of lines 13 and 14)</i>	\$	\$	\$	\$	\$

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program	FUTURE FUNDING PERIODS (Years)			
	(b) First	(c) Second	(d) Third	(e) Fourth
16.	\$	\$	\$	\$
17.				
18.				
19.				
20. TOTAL <i>(sum of lines 16-19)</i>	\$	\$	\$	\$

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges:	22. Indirect Charges:
23. Remarks:	

INSTRUCTIONS FOR THE SF-424A

Public reporting burden for this collection of information is estimated to average 180 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0044), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

General Instructions

This form is designed so that application can be made for funds from one or more grant programs. In preparing the budget, adhere to any existing Federal grantor agency guidelines which prescribe how and whether budgeted amounts should be separately shown for different functions or activities within the program. For some programs, grantor agencies may require budgets to be separately shown by function or activity. For other programs, grantor agencies may require a breakdown by function or activity. Sections A, B, C, and D should include budget estimates for the whole project except when applying for assistance which requires Federal authorization in annual or other funding period increments. In the latter case, Sections A, B, C, and D should provide the budget for the first budget period (usually a year) and Section E should present the need for Federal assistance in the subsequent budget periods. All applications should contain a breakdown by the object class categories shown in Lines a-k of Section B.

Section A. Budget Summary Lines 1-4 Columns (a) and (b)

For applications pertaining to a *single* Federal grant program (Federal Domestic Assistance Catalog number) and *not requiring* a functional or activity breakdown, enter on Line 1 under Column (a) the Catalog program title and the Catalog number in Column (b).

For applications pertaining to a *single* program *requiring* budget amounts by multiple functions or activities, enter the name of each activity or function on each line in Column (a), and enter the Catalog number in Column (b). For applications pertaining to multiple programs where none of the programs require a breakdown by function or activity, enter the Catalog program title on each line in *Column* (a) and the respective Catalog number on each line in Column (b).

For applications pertaining to *multiple* programs where one or more programs *require* a breakdown by function or activity, prepare a separate sheet for each program requiring the breakdown. Additional sheets should be used when one form does not provide adequate space for all breakdown of data required. However, when more than one sheet is used, the first page should provide the summary totals by programs.

Lines 1-4, Columns (c) through (g)

For new applications, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year).

For continuing grant program applications, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the Federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of amounts in Columns (e) and (f).

For supplemental grants and changes to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of Federal funds and enter in Column (f) the amount of the increase or decrease of non-Federal funds. In Column (g) enter the new total budgeted amount (Federal and non-Federal) which includes the total previous authorized budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of amounts in Columns (e) and (f).

Line 5 - Show the totals for all columns used.

Section B Budget Categories

In the column headings (1) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1-4, Column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each program, function or activity, fill in the total requirements for funds (both Federal and non-Federal) by object class categories.

Line 6a-i - Show the totals of Lines 6a to 6h in each column.

Line 6j - Show the amount of indirect cost.

Line 6k - Enter the total of amounts on Lines 6i and 6j. For all applications for new grants and continuation grants the total amount in column (5), Line 6k, should be the same as the total amount shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5.

Line 7 - Enter the estimated amount of income, if any, expected to be generated from this project. Do not add or subtract this amount from the total project amount, Show under the program

INSTRUCTIONS FOR THE SF-424A (continued)

narrative statement the nature and source of income. The estimated amount of program income may be considered by the Federal grantor agency in determining the total amount of the grant.

Section C. Non-Federal Resources

Lines 8-11 Enter amounts of non-Federal resources that will be used on the grant. If in-kind contributions are included, provide a brief explanation on a separate sheet.

Column (a) - Enter the program titles identical to Column (a), Section A. A breakdown by function or activity is not necessary.

Column (b) - Enter the contribution to be made by the applicant.

Column (c) - Enter the amount of the State's cash and in-kind contribution if the applicant is not a State or State agency. Applicants which are a State or State agencies should leave this column blank.

Column (d) - Enter the amount of cash and in-kind contributions to be made from all other sources.

Column (e) - Enter totals of Columns (b), (c), and (d).

Line 12 - Enter the total for each of Columns (b)-(e). The amount in Column (e) should be equal to the amount on Line 5, Column (f), Section A.

Section D. Forecasted Cash Needs

Line 13 - Enter the amount of cash needed by quarter from the grantor agency during the first year.

Line 14 - Enter the amount of cash from all other sources needed by quarter during the first year.

Line 15 - Enter the totals of amounts on Lines 13 and 14.

Section E. Budget Estimates of Federal Funds Needed for Balance of the Project

Lines 16-19 - Enter in Column (a) the same grant program titles shown in Column (a), Section A. A breakdown by function or activity is not necessary. For new applications and continuation grant applications, enter in the proper columns amounts of Federal funds which will be needed to complete the program or project over the succeeding funding periods (usually in years). This section need not be completed for revisions (amendments, changes, or supplements) to funds for the current year of existing grants.

If more than four lines are needed to list the program titles, submit additional schedules as necessary.

Line 20 - Enter the total for each of the Columns (b)-(e). When additional schedules are prepared for this Section, annotate accordingly and show the overall totals on this line.

Section F. Other Budget Information

Line 21 - Use this space to explain amounts for individual direct object class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.

Line 22 - Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.

Line 23 - Provide any other explanations or comments deemed necessary.

SUPPLEMENTAL INSTRUCTIONS FOR SF-424A

Form 424A

Section A Budget Summary:

Lines 1 - 5 The Prescott Stranding Grant Program is a single Federal grant program that does not require a functional or activity breakdown, therefore, only lines 1 and 5 have to be completed.

1 (a) The Catalog Program title, **Marine Mammal Data Program**, is the Program function.

1 (b) The Catalog Number is **11.439**.

1 (c) and (d) should be left blank for the 2001/2002 Prescott Stranding Grant Program applicants because all applications will be new therefore there will be no unobligated funds.

1 (e) through (f): enter the amount of funds needed for the funding period.

Line 5 will be the same as Line 1. The totals should also be the same as those below, in Line 6.(k).

Section B - Budget Categories

Only Column 1 should be completed since no breakdowns are required by the Prescott Stranding Grant Program. The Program Title "Marine Mammal Data Program" should be entered into the Column 1 heading.

6(a) through 6(i): see attached justification checklist details leading up to the totals that should be entered into these blocks. These reflect the total costs of the project for each "Object Class Category" (Personnel, Fringe Benefits, etc), including both Federal and non-Federal shares.

6(j) Indirect charges - indirect costs are essentially overhead costs for basic operational functions (e.g., lights, rent, water, insurance) that are incurred for common or joint objectives and therefore cannot be identified specifically within a particular project. They can only be included in the budget if you have an established indirect cost rate with the Federal government. Contact a Fisheries Specialist Grants Officer (301 713-0922) to obtain an established rate. For this solicitation, the Federal share of the indirect costs may not exceed 25 percent of the total proposed direct costs. If you have an approved indirect cost rate above 25 percent of the total proposed direct cost, you may use the amount above the 25-percent level up to the negotiated rate as part of the non-Federal share. You must include a copy of the current, approved, negotiated indirect cost agreement with the Federal government with your application. Note: if you are applying for a grant to satisfy a priority related to operations, these overhead charges may be considered Direct Charges. Contact the Fisheries Specialist Grants Officer for clarification if needed.

6(k) Totals - should be the same as the totals in Section A.

7 - Although we do not anticipate income generation from Prescott Grant Application Projects, if there will be income, identify the estimated amount on line 7.

Section C - Non-Federal Resources

Since only one Grant Program is involved, only Lines 8 and 12 need to be completed. The program title for column (a) is Marine Mammal Data Program.

Because the Prescott Stranding Grant Program requires a minimum of 25% in matching funds, the total in this section should be at least 25% of the total project costs (can be more). For example, a project costing \$133,333 may include a \$100,000 Federal Share and a \$33,333 non-Federal Share. While the total Federal Share cannot exceed \$100,000, the non-Federal share can exceed 25% of the total.

Section D - Forecasted Cash Needs

Identify the anticipated quarterly costs, per application instructions.

Section E - Budget Estimates of Federal Funds Needed for Balance of the Project

We do not anticipate that applicants will be identifying unfunded needs of the project. However, if receipt of other Federal grants is anticipated and/or required prior to completion of the project, that should be noted in this section.

Section F - Other Budget Information

This section provides you with some space for comments, as noted on the “Instruction For the SF-424A”. Note that additional justification should be submitted on a separate sheet. See the Review Checklist for budget justifications for guidance on important supplementary budget information, attached.

GUIDELINES FOR A PROPER BUDGET JUSTIFICATION, TO BE SUBMITTED WITH FINANCIAL ASSISTANCE APPLICATIONS TO NOAA

Prepared by NOAA GMD, adapted by NMFS F/PR

SPECIAL NOTE: NOAA expects that applicants will ensure that no Federal or non-Federal grant funds will be expended for in-kind goods or services, for purposes of providing transportation, travel, and other expenses for any Federal employee. This provision will be incorporated into the award document, if an award is granted based on this application, as a Special Award Condition.

Contact a Fisheries Specialist Grants Officer if you have questions regarding the budget justification: 301 713-0922.

MATCHING: The Prescott Stranding Grant Program has a 25% matching requirement. Details given below for the Federal share must also be given for the matching and cost sharing portion of the grant.

SALARIES AND WAGES:

1. Is each individual identified by name and position?
2. Are time commitments such as hours and percent of time stated for each position?.
3. Are the total charges for each person listed along with an explanation of how the costs were calculated?
4. Do the combined charges for any individual exceed 100% of their time?
5. Do the time commitments and charges appear reasonable?
6. For support or executive personnel, are costs charged to salaries excluded from the indirect cost category?
7. Are all individuals employees of the applicant organization? (If not, explain).
8. Are salary increases justified for the grant period?.
9. Are any salary/personnel costs unallowable?. (i.e. Federal Employees or legislative personnel)

FRINGE BENEFITS: The budget narrative should provide a description of the benefits received by personnel when rates are 25% of the total salary or higher.

1. Are fringe benefits identified as a separate item?
2. Are the types of fringe benefits indicated?.
- 3 Do the fringe benefits and charges appear reasonable?
4. Are the total charges for each person listed along with an explanation of how the charges were calculated?
5. Are fringe benefits charged to federal and matching categories in the same proportion as salaries?

TRAVEL:

1. Estimate the number and distance of trips anticipated, along with the estimated mileage, method of travel, cost per mile and duration, number of travelers, per diem rate for meals and lodging, based on your response area and previous years' experience.
2. If actual trip details are unknown, indicate the basis for the proposed travel charges (identify how you came up with estimates, above).
3. Is the requested travel directly relevant to the successful completion of the project?.
4. Are the travel charges reasonable?.
5. Contingency or miscellaneous charges must be excluded!

SUPPLIES: An explanation is necessary only for supplies costing over \$1,500 or 5% of an award, whichever is greater.

1. Are supplies itemized by type of material or nature of expense?
2. For general office or business supplies, is the total charge listed along with the basis for the charge (i.e. historical use rates)?
3. For other specific supply categories, is the number of units, cost per unit and total cost specified?
4. Are the charges necessary for the successful completion of the project?
5. Are the charges reasonable?
6. Are disallowed costs (e.g. liquor, entertainment) excluded?
7. Contingency or miscellaneous charges must be excluded!

EQUIPMENT: For any items of equipment whose costs exceed \$5,000, a description of the item and associated costs is required.

1. Is each item of equipment listed?
2. If over \$5,000 is there a description of how it will be used in the project?
3. If over \$5,000 has a lease vs purchase analysis been completed?
4. For each item of equipment, is the number of units, cost per unit and total cost specified?
5. Is each item of equipment necessary for the successful completion of the project?
6. Are the charges for each item reasonable?
7. Are disallowed costs excluded?
8. Contingency or miscellaneous charges must be excluded!

CONTRACTUAL:

1. Is each contract or subgrant listed as a separate item? (Separate budgets are required for subgrants or contracts regardless of the dollar value.)
2. Are the products/services to be acquired described along with the applicability of each to the project?
3. Do the costs appear reasonable?
4. Are any sole source contracts contemplated?
5. If yes, is a sole source justification included with the application which describes why the proposed sole source entity is the only source capable of meeting the applicant's project needs?
6. Are disallowed costs excluded?
7. Contingency or miscellaneous charges must be excluded!
8. Are there contracts with non-US organizations?
9. Do you have a CD-512 on file for each of your subgrants or contracts?

CONSTRUCTION:

1. Is the construction/renovation authorized for this program? (No major construction is authorized, though renovation that may include new pools, for example, may be acceptable)
2. Is the construction/renovation described?
3. Is the method described which was used to calculate costs?
4. Are the proposed costs presented in sufficient detail? Should include the following:
 - a. A listing of work to be performed
 - b. Cost detail by task or work order contemplated
 - c. Is the work being done by the applicant or outside contractors?

5. Is there a need for the type of work/costs being proposed?.
6. Is the basis for the estimates of cost present? (Is there documentation to support cost estimates?)
7. Are the costs justified, reasonable and allowable? Verify costs proposed to quotes received.
(Generally, the presence of more than one bid obviates the need for extensive tests for reasonableness due to the element of competition involved)

OTHER:

1. Are items listed by type of material or nature of expense?.
2. For each charge, is the number of units, cost per unit and total cost specified?.
3. Are the charges necessary for the successful completion of the project?
4. Are the charges reasonable?
5. Are disallowed costs (e.g. liquor, entertainment) excluded?
6. Are charges which duplicate indirect cost items excluded?
7. Contingency or miscellaneous charges must be excluded!

INDIRECT COSTS: indirect costs are essentially overhead costs for basic operational functions (e.g., lights, rent, water, insurance) that are incurred for common or joint objectives and therefore cannot be identified specifically within a particular project. For a grant application addressing a priority related to operations, these overhead costs may be considered direct costs:

1. Are indirect costs requested?
2. Is a copy of the current approved rate from the cognizant agency included?
3. Is the correct rate being used?.
4. Is the rate applied to the correct base?.
5. Are charges which duplicate direct costs excluded? (If no, explain/revise).

MATCHING:

1. A minimum of 25% of the total costs must be matched by the applicant. Does the application meet the matching requirements?
2. Are the sources of match clearly identified? (i.e. cash or in-kind)
3. Does the application provide adequate documentation to support in-kind contributions?
4. Does the application exclude matching contributions, cash or in-kind, used for other programs?
5. Does the application exclude federal funds used as match?
6. Are all matching contributions necessary for accomplishing the project?
7. Are all matching contributions in compliance with federal cost principles?

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL		TITLE	
APPLICANT ORGANIZATION		DATE SUBMITTED	

Title Page

Project title, duration, name, affiliation, address and phone number of the Principal Investigator, the project objective, the specific priority to which the application responds, and a statement regarding the Federal, non-Federal, and total costs of the project.

Narrative Project Description

May be up to 10 pages long, in Courier size 12 font, can be single or double spaced.

The narrative should demonstrate your knowledge of the need for the project, and show how your proposal builds upon any past and current work in the subject area, as well as relevant work in related fields. You should not assume that we already know the relative merits of the project you describe. You must describe your project as follows:

Project goals and objectives:

Identify the specific priority, to which the proposed project responds. Identify the problem/opportunity you intend to address and describe its significance to the marine mammal health and stranding response community. State what you expect the project to accomplish.

Project impacts:

Describe the anticipated impacts of the project on the recovery or treatment of stranded marine mammals or assessment of marine mammal health. Describe how you will make the results of the project available to the marine mammal health and stranding community.

Evaluation of project:

Specify the criteria and procedures that you will use to evaluate the relative success or failure of a project in achieving its objectives.

Need for government financial assistance:

Explain why you need government financial assistance for the proposed work. List all other sources of funding you have or are seeking for the project.

Federal, state, and local government activities and permits:

List any existing Federal, state, or local government programs or activities that this project would affect.

Project statement of work

The statement of work is an action plan of activities you

will conduct during the period of the project. You must prepare a detailed narrative, fully describing the work you will perform to achieve the project goals and objectives. The narrative should respond to the following questions:

(a) What is the project design? What specific work, activities, procedures, statistical design, or analytical methods will you undertake?

(b) Who will be responsible for carrying out the various activities? Highlight work that will be conducted by co-Investigators. Also, highlight work that will be subcontracted and provisions for competitive subcontracting. The lead organization and person listed as the technical contact, responsible for all technical oversight and implementation of the approved work plan as delineated in the Statement of Work, should be identified as the Principal Investigator. One Principal Investigator must be listed on each project. Project participants or organizations that will have a significant role in conducting the project should be listed as Co-Investigators. Organizations or individuals that support the project, for example, network members contributing data or materials, should be referred to as cooperators or collaborators.

(c) What are the major products and how will project results be disseminated? Describe products of the project, such as anticipated number of live animals that will be treated, preparation of a manual, video, technique, or piece of equipment. Indicate how project results will be disseminated to potential users.

(d) What are the project milestones? List milestones, describing the specific activities and associated time lines to conduct the scope of work. Describe the time lines in increments (e.g., month 1, month 2), rather than by specific dates. Identify the individual(s) responsible for the various specific activities. Although actual stranding events cannot be predicted, historic stranding data can be used to assess season, species, and likelihood of strandings. This information is critical for us to conduct a thorough review of your application, so we encourage you to provide sufficient detail.

Participation by persons or groups other than the applicant:

Describe how government and non-government entities, particularly other members of the marine mammal health and stranding response community, will participate in the project, and the nature of their participation. We will consider the degree of participation by members of the marine mammal health and stranding response community in

determining which applications to fund.

Project management:

Describe how the project will be organized and managed. Identify the principal investigator and other participants in the project. If you do not identify the principal investigator, we will return your application without further consideration. Include a description and copies of Principle Investigator's current LOAs, letter of designation, or letter of research authorization, and any necessary scientific research permits. List the Principle Investigator's and participant's prior or current Federal awards and describe resultant products. Include copies of any agreements between you and the participants describing the specific tasks to be performed. Include copies of any endorsements that you have received from other marine mammal health and stranding response participants related to this project. Provide a statement no more than two pages long of the qualifications and experience (e.g., resume or curriculum vitae) for the principal investigator, co-investigators, and any collaborators, cooperators, or consultants and/or subcontractors, and indicate their level of involvement in the project. If any portion of the project will be conducted through consultants and/or subcontracts, you must follow procurement guidance in 15 CFR part 24, ``Grants and Cooperative Agreements to State and Local Governments,' ' and 15 CFR part 14, ``Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals, Other Non-Profit, and Commercial Organizations.' '

Supporting Documentation:

You should include any relevant documents and additional information (i.e., maps, background documents, historic stranding statistics) that will help us to understand the project and the problem/opportunity you seek to address. This will not count as a part of the 10 page limit.

**PRESCOTT STRANDING GRANT PROGRAM
APPLICATION RECEIPT ACKNOWLEDGMENT**

TO BE COMPLETED BY APPLICANT

If you wish to receive notice of receipt of this application by the NMFS Prescott Stranding Grant Program, you **MUST** complete the following information. We will acknowledge receipt of your application by email only unless you do not have email capability.

1) Legal Applicant Name: Principal Investigator: _____

Affiliation: _____

2) Identification of Project (Include Title):

3) Application Date:

4) Email Address:

5) Complete Mailing Address:

Check if interested:

☐ Please send me a copy of the technical review panel comments, if any.

Do not write below this line -- FOR AGENCY USE ONLY

APPLICATION RECEIPT

Application received by:

Date:

ACKNOWLEDGMENT SENT

Date:

NMFS Proposal No. Assigned:

NOAA, NATIONAL MARINE FISHERIES SERVICE,
F/PR2 - Prescott Stranding Grant Program
SSMC 3; 1315 East-West Highway
Silver Spring, Maryland 20910

CERTIFICATIONS REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS; DRUG-FREE WORKPLACE REQUIREMENTS AND LOBBYING

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 15 CFR Part 26, "Governmentwide Debarment and Suspension (Nonprocurement)" and "Governmentwide Requirements for Drug-Free Workplace" and 15 CFR Part 28, "New Restrictions on Lobbying." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Commerce determines to award the covered transaction, grant or cooperative agreement.

1. DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

As requested by Executive Order 12549, Debarment and Suspension, and implemented at 15 CFR Part 26, for prospective participants in primary covered transactions, as defined at 15 CFR Part 26, Sections 26.105 and 26.110 -

(1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1) (b) of this certification; and

(d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

(2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

2. DRUG-FREE WORKPLACE REQUIREMENTS

Alternate I. Grantees Other Than Individuals

As required by the Drug-Free Workplace Act of 1988, and implemented at 15 CFR Part 26, Subpart F, for grantees, as defined at 15 CFR Part 26, Sections 26.605 and 26.610 -

A. The grantee certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's

workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an ongoing drug-free awareness program to inform employees about--

(1) The dangers of drug abuse in the workplace;

(2) The grantee's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that as a condition of employment under the grant, the employee will --

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(e) Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to the Director, Office of Federal Assistance, Office of Federal Assistance and Management Support, HCHB Room 6054, U.S. Department of Commerce, Washington, DC 20230. Notice shall include the identification numbers(s) of each affected grant;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d) (2), with respect to any employee who is so convicted--

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

B. The grantee shall insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance: (Street address, city, county, state, ZIP code):

Check ☐ if there are workplaces on file that are not identified here.

Alternate I I. Grantees Who Are Individuals

As required by the Drug-Free Workplace Act of 1988, and implemented at 15 CFR 26, Subpart F, for grantees, as defined at 15 CFR Part 26, Sections 26.605 and 26.610 -

(A) The grantee certifies that, as a condition of the grant, he or she will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity within the grant;

(B) If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to the Director, Office of Federal Assistance, Office of Federal Assistance and Management Support, HCHB Room 6054, U.S. Department of Commerce, Washington, DC 20230. When notice is made to such a central point, it shall include the identification number(s) of each affected grant.

3. LOBBYING

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 15 CFR Part 28, for persons entering into a grant, cooperative agreement or contract over \$100,000, or loan or loan guarantee over \$150,000, as defined at 15 CFR Part 28, Sections 28.105 and 28.110, the applicant certifies that to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or

employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form -LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above applicable certification(s).

NAME OF APPLICANT

AWARD NUMBER AND/OR PROJECT NAME

PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE

SIGNATURE

DATE

APPLICANT ELIGIBILITY

NOAA generally makes financial assistance awards to institutions of higher education, state and local governments, private nonprofit organizations, and commercial organizations.

Eligibility requirements for financial assistance programs are contained in the authorizing legislation and program regulations. Applicants should consult the authorizing legislation, program regulations, and request for applications published in the Federal Register to determine what requirements apply.

Eligible nonprofit organizations which have not previously received NOAA support must submit proof of their status with the application for assistance. Any of the following is acceptable evidence of status:

- * A reference to the applicant organization in the IRS's most recent list of tax exempt organizations under Section 501 (c) of the IRS Code;
- * A copy of a currently valid IRS tax exemption certificate;
- * A statement from a State taxing body or State Attorney General certifying that the applicant organization has nonprofit status and that none of the net earnings accrue to any private shareholders;
- * A certified copy of the organization's certificate of incorporation or similar document that clearly establishes nonprofit status; or,
- * Any of the above proof regarding a parent organization if one exists, and a statement signed by the parent organization that the applicant organization is a local nonprofit affiliate.